LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS

BUREAU OF PRIMARY CARE AND RURAL HEALTH

2002-2003 ANNUAL REPORT



IMPROVING THE HEALTH STATUS OF LOUISIANA RESIDENTS IN RURAL AND UNDERSERVED AREAS . . .

A NOTE FROM THE DIRECTOR

In August 2002, the Bureau of Primary Care and Rural Health (the Bureau) convened a statewide advisory committee of more than 50 diverse members to develop and implement a long-term strategic plan. This plan was completed in December 2002 and outlines critical strategies that will continue to guide us in our efforts to accomplish our mission through 2005.

In this first annual report, we honor our commitment to continually inform our state partners and communities of our efforts. The report outlines the goals that were developed in our strategic planning process and highlights our progress in achieving these goals. It also outlines our plans for growth in the future. We hope that you are proud of the accomplishments that we have made and we look forward to your support and encouragement in going forward with our work in the months and years to come.

I would like to thank our statewide advisory committee for its leadership and commitment throughout the development and implementation of our strategic plan. I also would like to thank the Bureau's staff for all of their hard work and tireless dedication. It is only through our combined efforts and earnest commitment to improving the health status of Louisiana that we will make a difference in the lives of our residents.

Kristy H. Nichols, M.S., Director

OUR STATE PARTNERS



OUR STAFF

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OUR MISSION

The Bureau's mission is to improve the health status of Louisiana residents in rural and underserved areas by working proactively to build community health systems' capacity to provide integrated, efficient and effective health care services.

The Bureau has set the following priorities to fulfill this mission:

- Integrating local health care services
- Developing strong community partnerships
- Building local health care resources
- Supporting effective clinical practices and health care organizations
- Reducing health disparities
- Recruiting and retaining primary health care providers
- Promoting relevant state and national health policy
 - Providing valuable health information

OUR SERVICES

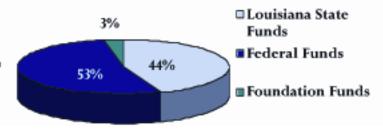
The Bureau's services are provided to communities, critical access hospitals, federally qualified health centers, physician practices, rural health clinics and small rural hospitals. They are:

- Community-Based and Rural Health Program grants
- Community development services
- Critical access hospital designations and technical support
- Demographics and health statistics
- Economic impact studies
- Educational opportunities

- Feasibility studies
- Health professional shortage area designations
- Policy information
- Practice management services
- Recruitment and retention services
- · Resource development technical support
- Web-based grants clearinghouse

OUR FUNDING

- · Louisiana Department of Health and Hospitals
- U.S. Department of Health and Human Services'
 Health Resources and Services Administration's Bureau
 of Health Professions, Bureau of Primary Care, and
 Office of Rural Health Policy
- Robert Wood Johnson Foundation



OUR ACCOMPLISHMENTS

INCREASED COMMUNITY FUNDING

Community-Based and Rural Health Program

The Community-Based and Rural Health Program, a grant program administered by the Bureau, was appropriated \$500,000 in funding from the Louisiana State Legislature in the 2002 state fiscal year. The program provides financial assistance to rural and underserved areas to maintain, enhance or expand access to community-based primary and preventive health care services. In February 2003, the Bureau awarded grants to 11 communities ranging from \$17-50,000 for physician and dentist recruitment projects, feasibility studies and related federally qualified health center (FQHC) grant application activities, patient referral and case management systems, teleradiology projects and health education programs.

The Louisiana Legislature increased the appropriation to \$1 million in the 2003 state fiscal year, allowing the Bureau to provide communities up to \$150,000 for FQHC development. As a result, the Bureau was able to award grants to 18 communities for FQHC developmental activities, oral health service expansions, prescription medication assistance and pharmacy case management for mental health patients.

Resource Development

The Bureau also assisted communities in their efforts to secure additional grant resources through grant writing workshops, grant writing consultations and announcements of available grant opportunities. Grant opportunities are regularly announced through the Health Matters listserv; e-mail gprentic@dhh.la.gov to be added. More than 200 participants attended four grant writing workshops hosted or co-sponsored by the Bureau. These workshops focused primarily on the federal Health Resources and Services Administration's (HRSA) Network Development Grant Program, Network Development Planning Grant Program, Rural Health Outreach Grant Program and the FQHC Program. In 2002-2003, HRSA awarded Louisiana communities more than \$1.3 million in network and outreach services grant monies.

EXPANDED AND SUSTAINED PRIMARY CARE ACCESS

Practice Management

In order to promote better financial performance, enhanced quality of care and better patient health outcomes, the Bureau has partnered with Louisiana Rural Health Access Program to offer communities the services of a qualified practice management consultant who assesses a center's everyday operations and makes recommendations for changing systems' inefficiencies. Through practice management services, the Bureau provides assistance to FQHCs, physician practices, small rural hospitals and clinics in rural and medically underserved communities to improve their overall operations and ability to provide more effective, quality primary health care services. Services include patient flow analysis, medical records review, Medicaid and insurance billing technical assistance and medical coding training.

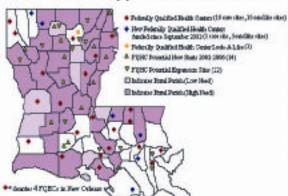
In 2002-2003, comprehensive practice management services were provided to 14 clinics, physician practices, FQHCs and rural health clinics in rural and underserved areas. The sites received support in areas such as billing assessments, operations assessments, staffing, training, accounting practices and rural health clinic conversion. The Bureau also held or co-sponsored two practice management workshops. More than 150 participants attended workshops that addressed billing and reimbursement for rural health clinics and general practice management techniques.

Rural Health Clinics

The 5th Circuit Court of Appeals ruled in favor of the Louisiana Department of Health and Hospital's (DHH) request to pay provider-based rural health clinics and disproportionate share hospitals their uncompensated costs for caring for the uninsured. DHH is currently seeking approval from the U.S. Centers for Medicare and Medicaid Services to reimburse provider-based rural health clinics for these costs. The Bureau also certified eligibility for 27 rural health clinics.

Federally Qualified Health Centers

One of the Bureau's top priorities is to increase the number of FQHCs in Louisiana. FQHCs are federally designated by HRSA's Bureau of



Primary Health Care and receive enhanced Medicare and Medicaid reimbursement and federal grant funding to support the care of the uninsured. Because successful FQHCs strengthen health care systems by enabling communities to effectively provide health care services locally, development of FQHCs is important to Louisiana's medically underserved communities. To foster the development of FQHCs, the Bureau, the Louisiana Primary Care Association and existing community health centers have identified targeted areas for FQHC development. Since September 2002, six new health center sites have been designated. The sites include St. Charles Community Health Center, Teche Action Clinic at Dulac, David Raines satellite sites in Webster Parish and Claiborne Parish and St. Helena satellite sites in Tangipahoa Parish and Rapides Parish. The Louisiana Primary Care Association and the Bureau will continue to work toward our goal of 31 health center sites by 2005.

MEDICARE RURAL HOSPITAL FLEXIBILITY PROGRAM "FLEX"

Critical Access Hospitals

In January 2003, there were nine hospitals in Louisiana designated as critical access hospitals. Since then, two additional hospitals have been converted as a result of Louisiana's FLEX program. An advisory committee was formed in August 2002 to formalize the goals, strategies and targeted outcomes for the Louisiana FLEX program. The work plan developed has enabled critical access hospitals and other participating organizations to develop a common vision, which is "to achieve optimum performance of Louisiana's critical access hospitals through improved viability, sustainability and community connectivity." The plan guides efforts to provide performance improvement planning and technical assistance for critical access and small rural hospitals.

The Louisiana FLEX program has provided technical support to the 11 rural hospitals in conversion or exploring conversion on an ongoing basis. In 2002, four hospitals considering critical access hospital conversion received feasibility study grants. Grants were given to nine hospitals to hire emergency room physicians for the treatment of uninsured and underinsured patients. A total of 20 rural communities received support from the Critical Access Hospital/Emergency Medical Services partnership, including automatic electronic defibrillators, professional education and community training. The Bureau also is investing significant federal funding into the performance improvement of small rural and critical access hospitals and has formed a quality improvement task force with nine participating hospitals. Additionally, a Charge Description Master Review Project of eight hospitals is in place to ensure coding compliance and identify lost charges.

PRIMARY CARE PROVIDER RECRUITMENT AND RETENTION

Health Professional Shortage Area Designations

Identifying health professional shortage areas (HPSAs) is one of the Bureau's top priorities. Our HPSA Designation Specialist researches and reviews eligible areas throughout the state and recommends designations to the federal Shortage Designation Branch. In 2002-2003, the Bureau reviewed 63 areas in Louisiana. Forty-five requests for primary care HPSAs, 10 requests for dental health HPSAs and three requests for mental health HPSAs were submitted. So far, 2+ requests have been approved by the federal Shortage Designation Branch. Twenty-four of the primary care requests and all 10 dental requests are pending approval. HPSA designations determine a community's eligibility for the J-1 Visa Waiver Program, the State Loan Repayment Program, National Health Service Corps and Med Job Louisiana in addition to approximately 40 other federal and state programs.

J-I Visa Waiver Program

The J-1 Visa Waiver Program is a tool for recruiting primary care physicians and limited needed specialty care physicians. In exchange for serving in an underserved area, the program waives the requirement for J-1 visa holders to return to their home country for two years before applying for a work visa or permanent residence. The Bureau processed 15 requests for J-1 visa waivers in state fiscal year 2002-2003.

State Loan Repayment Program

Through the State Loan Repayment Program, practitioners recruited to difficult-to-fill underserved areas receive loan repayment funds for educational debt. Twenty-three providers applied for the program and received a total of \$281,698. Now, these providers are serving in communities with health professional shortages.

National Health Service Corps

The National Health Service Corps loan repayment and scholarship programs are designed to aid communities in their efforts to recruit and retain primary care, dental and mental health professionals. In 2003, 23 sites were approved for National Health Service Corps. Nineteen health care providers were approved for either National Health Service Corps scholarship or loan repayment funds. In the last year, Louisiana experienced a 25% increase in National Health Service Corps enrollment.

Med Job Louisiana

Med Job Louisiana is the most recent effort to provide professional recruitment services to entities in HPSAs. The program is a partnership between the Bureau, the Louisiana Area Health Education Centers and the Louisiana Rural Health Access Program. In 2002, a statewide provider recruitment program was developed based on a pilot program in Southwest Louisiana. An appropriation from the Louisiana State Legislature, allocated to the Bureau in the 2003 session, provides funds for the program. Two recruiters, Carl Kelly and Lee Ann Albert, began work in April 2003. It is projected that Med Job Louisiana recruitment efforts will result in the placement of 20 physicians annually.

Medical Job Fair of Louisiana

Since 1995, the Bureau has sponsored Southwest Louisiana Area Health Education Center's Medical Job Fair of Louisiana, a free provider recruitment fair. For the past two years, an average of 20 hospitals, clinics, practice groups and communities located in rural and underserved areas exhibited at the fairs. Approximately 70 health care providers attended the fairs and educational workshops. In 2002, two hands-on suturing workshops were offered for 40 medical students. In 2003, registered nurses, pharmacists, physical therapists and radiologic technologists were invited for the first time. Information about Medical Job Fair of Louisiana is available at www.medicaljobfair.org.

INFORMATION AND RESOURCES

Web site

In September 2002, the Bureau launched its Web site, www.dhh.state.la-us/pcrh, as a way to enhance its capacity to deliver timely, relevant information to Louisiana's communities. The Web site contains data and maps, policy information, program descriptions, news releases and announcements. The site is very useful to the Bureau staff, as well as the communities, hospitals, clinics and physicians we serve. Visit the Web site at www.dhh.state.la.us/pcrh.

Newsletter

The first Bureau newsletter was issued in January 2003 as a way to update and inform partners, legislators and rural communities about the the Bureau's progress in regard to the strategic plan. Each month the newsletter is mailed as an insert in the Louisiana Rural Health Association's newsletter. It contains program updates, grant opportunities, event announcements and policy issues. To be added to the newsletter mailing list, please send a request to rrepp@dhh.la.gov. Each month the newsletters are posted at www.dhh.state.la.us/pcrh.

Economic Impact Studies

The Bureau provides economic impact studies to help communities realize the direct relationship between their local health care sector and their economy and to provide information that supports community health systems development. The reports generated not only contain economic impact data, but also various health indicators and demographics. In the fall of 2002, the Bureau developed a plan to provide economic impact studies for all rural parishes in Louisiana. St. Charles Parish served as a pilot project. Through the use of specific data about the parish, a thorough study of the parish's health care sector and its financial contributions to the surrounding communities was completed. This study was used as part of an expansion proposal St. Charles Hospital presented to its board. The board approved the proposal, and the expansion process is moving forward.

Economic impact studies of 47 Louisiana parishes were completed by October 2003 and presented at the Louisiana Rural Health Association Fall Conference. The Bureau has future plans to update its software in order to provide more advanced studies for use in conjunction with community health systems development. The completed economic impact studies are available online at www.dhh.state.la.us/pcrh.

OUR FUTURE

COMMUNITY HEALTH SYSTEMS DEVELOPMENT

The Bureau is now prepared to offer communityhealth systems development services to health care facilities, organizations and providers across the state. These services will be offered at no charge to communities in HPSAs for the purpose of expanding or sustaining access to primary and preventive health care services. The following assistance will be offered: small and large group facilitation, needs assessments, strategic planning, economic impact studies, enhanced demographics scans, mapping services, market analyses, feasibility studies, practice management services, grant writing training and resource development technical support.

CRITICAL ACCESS HOSPITALS

A Web-based quality improvement monitoring program will be implemented in 14 critical access hospitals in Louisiana. The program will allow the 14 hospitals to compare quality improvement outcomes with more than 700 critical access hospitals nationwide. Critical access hospitals will have the ability to effectively track patient care outcomes, adjust processes where necessary and report their quality improvement outcomes to their patient community. The use of the program is expected to result in improved patient care.

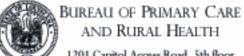
RECRUITMENT AND RETENTION

Recruitment and retention will be a major focus of the Bureau in the next year. We hope to expand our services to include the recruitment of dentists, psychiatrists and nurses. In addition, the Bureau is evaluating how to improve the state's efforts to recruit and retain primary care providers. These efforts must be considered a high policy priority in order for Louisiana to continue to make progress in this area. A community's ability to attract and retain qualified health care providers is complex, ranging from local economic development and quality of life issues to developing an adequate supply of health care professionals within the state who want to serve our most needy areas. Upcoming policy priorities will concentrate on educating legislators and policymakers on where to direct recruitment efforts.

EVALUATION

The Bureau contracted with an independent evaluator to conduct an internal and external evaluation of our performance for the period of July 1, 2002 to December 31, 2003. The assessment will identify the Bureau's current strengths and weaknesses and will be utilized to modify and expand the Bureau's future efforts. The results of the evaluation will be reported to the Bureau in March 2004. A summary of the evaluation findings will be reported in the Bureau's 2004 annual report. The Bureau anticipates conducting similar performance evaluations on an annual basis.

Louisiana Department of Health and Hospitals



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